

Docket Number (Optional)  
20093A-002100US

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)



In re Application of Gerald P. Murphy et al.

Application Number 09/301,380

Filed June 15, 2001

For NR-CAM GENE, NUCLEIC ACIDS AND NUCLEIC ACID PRODUCTS FOR THERAPEUTIC AND DIAGNOSTIC USES FOR TUMORS

Group Art Unit  
1635

Examiner  
M. Schmidt

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

- ☐ One month (37 CFR 1.17(a)(1)) \$
- ☐ Two months (37 CFR 1.17(a)(2)) \$
- ☒ Three months (37 CFR 1.17(a)(3)) \$920
- ☐ Four months (37 CFR 1.17(a)(4)) \$
- ☐ Five months (37 CFR 1.17(a)(5)) \$

☒ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ 460 .

☐ A check in the amount of the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☐ The Commissioner has already been authorized to charge fees in this application to a Deposit Account.

☒ The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 20-1430.  
I have enclosed a duplicate copy of this sheet.

I am the ☐ applicant/inventor.

☐ assignee of record of the entire interest. See 37 CFR 3.71

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☒ attorney or agent of record.

☐ attorney or agent under 37 CFR 1.34(a).

Registration number if acting under 37 CFR 1.34(a). \_\_\_\_\_

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

May 23, 2002

Date

09301380

*Brian W. Poor*

Signature

Brian W. Poor, Reg. No. 32,928

Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

Burden Hour Statement: This form is estimated to take 0.1 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231. SE 5012887 v1

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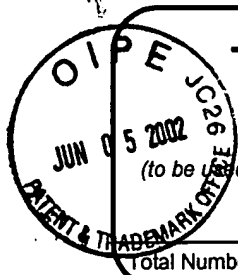
Please type a plus sign (+) inside this box → ☒

PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	09/301,380
Filing Date	June 15, 2001
First Named Inventor	Murphy, Gerald P.
Group Art Unit	1635
Examiner Name	M. Schmidt
Attorney Docket Number	20093A-002100US

RECEIVED

JUN 13 2002

TECH CENTER 1600/2900

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form  <input type="checkbox"/> Fee Attached  <input checked="" type="checkbox"/> Amendment / Response  <input type="checkbox"/> After Final  <input type="checkbox"/> Affidavits/declaration(s)  <input checked="" type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input checked="" type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Response to Missing Parts/ Incomplete Application  <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application)  <input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition  <input type="checkbox"/> Petition to Convert to a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):  Return Postcard
Remarks		The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm and Individual name	Townsend and Townsend and Crew LLP Brian W. Poor	Reg. No. 32,928
Signature		
Date	May 23, 2002	

### CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date:		
May 23, 2002		
Typed or printed name	Wendy Walton	
Signature		Date May 23, 2002

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.  
SE 5012885 v1

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<h1 style="margin: 0;">FEE TRANSMITTAL</h1> <h2 style="margin: 0;">for FY 2001</h2> <p style="font-size: small; margin: 5px 0;">Patent fees are subject to annual revision.</p>		<p><b>Complete if Known</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Application Number</td> <td>09/301,380</td> </tr> <tr> <td>Filing Date</td> <td>June 15, 2001</td> </tr> <tr> <td>First Named Inventor</td> <td>Murphy, Gerald P.</td> </tr> <tr> <td>Examiner Name</td> <td>M. Schmidt</td> </tr> <tr> <td>Group Art Unit</td> <td>1635</td> </tr> <tr> <td>Attorney Docket No.</td> <td>20093A-002100US</td> </tr> </table>		Application Number	09/301,380	Filing Date	June 15, 2001	First Named Inventor	Murphy, Gerald P.	Examiner Name	M. Schmidt	Group Art Unit	1635	Attorney Docket No.	20093A-002100US
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<p><b>TOTAL AMOUNT OF PAYMENT</b> (\$) 640</p>		<p style="font-size: 2em; margin: 0;">RECEIVED</p> <p style="font-size: 1.2em; margin: 0;">JUN 13 2002</p> <p style="font-size: 1.2em; margin: 0;">TECH CENTER 1600/2900</p>													

METHOD OF PAYMENT					FEE CALCULATION (continued)																																																																																																																																																																																								
<p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:</p> <p>Deposit Account Number: <span style="border: 1px solid black; padding: 2px 20px;">20-1430</span></p> <p>Deposit Account Name: <span style="border: 1px solid black; padding: 2px 40px;">Townsend and Townsend and Crew LLP</span></p> <p><input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17</p> <p><input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</p> <p>2. <input type="checkbox"/> Payment Enclosed:</p> <p style="text-align: center;"> <input type="checkbox"/> Check    <input type="checkbox"/> Credit card    <input type="checkbox"/> Money Order    <input type="checkbox"/> Other         </p>					<p><b>3. ADDITIONAL FEES</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Large Fee Code</th> <th>Entity Fee (\$)</th> <th>Small Fee Code</th> <th>Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>105</td><td>130</td><td>205</td><td>65</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>127</td><td>50</td><td>227</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet.</td><td></td></tr> <tr><td>139</td><td>130</td><td>139</td><td>130</td><td>Non-English specification</td><td></td></tr> <tr><td>147</td><td>2,520</td><td>147</td><td>2,520</td><td>For filing a request for reexamination</td><td></td></tr> <tr><td>112</td><td>920*</td><td>112</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td><td></td></tr> <tr><td>113</td><td>1,840*</td><td>113</td><td>1,840*</td><td>Requesting publication of SIR after Examiner action</td><td></td></tr> <tr><td>115</td><td>110</td><td>215</td><td>55</td><td>Extension for reply within first month</td><td></td></tr> <tr><td>116</td><td>400</td><td>216</td><td>200</td><td>Extension for reply within second month</td><td></td></tr> <tr><td>117</td><td>920</td><td>217</td><td>460</td><td>Extension for reply within third month</td><td>460</td></tr> <tr><td>118</td><td>1,440</td><td>218</td><td>720</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td>128</td><td>1,960</td><td>228</td><td>980</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>119</td><td>320</td><td>219</td><td>160</td><td>Notice of Appeal</td><td></td></tr> <tr><td>120</td><td>320</td><td>220</td><td>160</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>121</td><td>280</td><td>221</td><td>140</td><td>Request for oral hearing</td><td></td></tr> <tr><td>138</td><td>1,510</td><td>138</td><td>1,510</td><td>Petition to institute a public use proceeding</td><td></td></tr> <tr><td>140</td><td>110</td><td>240</td><td>55</td><td>Petition to revive - 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Independent Claims	<span style="border: 1px solid black; padding: 0 10px;">-3**</span>	= <span style="border: 1px solid black; padding: 0 10px;">X</span>	= <span style="border: 1px solid black; padding: 0 10px;">X</span>	= <span style="border: 1px solid black; padding: 0 10px;">X</span>																																																																																																																																																																																									
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103	18	203	9	Claims in excess of 20																																																																																																																																																																																									
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104	280	204	140	Multiple dependent claim, if not paid																																																																																																																																																																																									
109	84	209	42	** Reissue independent claims over original patent																																																																																																																																																																																									
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<b>SUBTOTAL (2)</b>					(\$)																																																																																																																																																																																								

\*\*or number previously paid, if greater; For Reissues, see above

SUBMITTED BY				Complete (if applicable)	
Name (Print/Type)	Brian W. Poor	Registration No. (Attorney/Agent)	32,928	Telephone	206-467-9600
Signature				Date	May 23, 2002

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